FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Wicki Andreas				2. Issuer Name and Ticker or Trading Symbol Pacira Pharmaceuticals, Inc. [PCRX]										5. Relationsh (Check all ap X Direct		plicable)		erson(s) to Issuer	
(Last)	(Fir	,	fiddle)		3. Date of Earliest Transaction (Month/Day/Year) 06/17/2013										Officer (give title below)		е	Other (specify below)	
CENTENNIAL TOWERS, 3RD FLOOR, 2454 WEST BAY ROAD				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) GRAND CAYMAN E9 00000			0000											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)																			
		Table	e I - Non-Deriv	ative S	ecu	rities	s Acc	qui	ired,	Dis	sposed (	of, or	Benefi	ciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)				2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				Benefic Owned		ties For		n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership
						Code	е	v	Am	ount	(A) or (D)	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common Stock 06/1			06/17/2013			S			50	),145(1)	D \$29.85		<b>79</b> <sup>(2)</sup>	2,05	54,820			See footnote.(3)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaci Code (In 8)		5. Nu of Deriv Securi Acqu (A) or Disport of (D) (Instrand 5	ative rities ired sed	Expiration Date (Month/Day/Yeas)			ate Year)	Amo Secu Und Deri Secu 3 an	Amount of Securities Underlying Derivative Security (Instr 3 and 4)				ily I	10. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership

## Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by HBM Healthcare Investments (Cayman) Ltd."HBM") on June 14, 2013.
- 2. The price reported on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$29.85 to \$29.90, inclusive. Upon request, the reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the Securities and Exchange Commission full information regarding the shares sold at each separate price within the ranges set forth in footnote two (2) of this Form 4.
- 3. The board of directors of HBM (the "HBM Board") has sole voting and investment power with respect to the securities held by such entity and acts by majority vote. The reporting person does not have sole voting or investment power over the securities held by HBM. However, the reporting person may be deemed to have beneficial ownership of these securities by virtue of his membership on the Board of HBM. The reporting person disclaims beneficial ownership of the securities reported herein for the purposes of Rule 16a-1(a) under the Securities Exchange Act of 1934, as amended (the "Exchange Act"), except to the extent of his pecuniary interest herein, if any. This report on Form 4 shall not be deemed an admission that the reporting person is a beneficial owner for the purpose of Section 16 of the Exchange Act, or for any other purpose.

/s/ Mehdi Khodadad (Attorney-in-Fact) 06/19/2013

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.